

**NON-PROVISIONAL
UTILITY PATENT APPLICATION
TRANSMITTAL - 37 CFR 1.53(b)**

☐ **Duplicate**
(check, if applicable)



MAIL STOP PATENT APPLICATION

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Attorney Docket No.: 600362-1U1
First Named Inventor: Frank T. Aquilino
Express Mail Label No.: EV312207297US
Total Pages of Transmittal Form: 2

Transmitted herewith for filing is the non-provisional utility patent application entitled:

WAGER MANAGEMENT SERVICE THAT ALLOWS INDIVIDUALS TO MAKE
ELECTRONIC WAGERS DIRECTLY WITH OTHER INDIVIDUALS

which is:

an ☒ Original.

☒ This non-provisional patent application is based on Provisional Patent Application
No. 60/420,478, filed October 21, 2002.

Enclosed are:

☒ Specification (including Abstract) and claims: 20 pages.

☒ 28 sheets of drawings (formal).

☒ Applicant, by its undersigned attorney, claims Small Entity Status under 37
C.F.R. §1.27 as ☒ an Independent Inventor, or ☐ a Small Business Concern, or
☐ a Non-Profit Organization.

NO EXECUTED OR UNEXECUTED DECLARATION IS ENCLOSED. The Declaration
will be filed in response to the forthcoming Notice to File Missing Parts.

The filing fee is calculated as follows:

| | | | SMALL ENTITY | | | LARGE ENTITY | |
|---|-----------|-----------|--------------|------------------|----|--------------|-----------------|
| CLAIMS | NO. FILED | NO. EXTRA | BASIC FEE: | | | BASIC FEE: | |
| | | | \$385 | | | \$770 | |
| Total | 28 - 20 = | 8 | X9 | \$ 72.00 | OR | X18 | \$ 00.00 |
| Independent | 3 - 3 = | 0 | X43 | \$ 00.00 | OR | X86 | \$ 00.00 |
| [-0-] Multiple Dependent Claims Present | | | \$145 | \$ 00.00 | OR | \$290 | \$ 00.00 |
| | | | TOTAL | \$ 457.00 | OR | TOTAL | \$ 00.00 |

- ☒ [X] The Commissioner is not authorized to charge the filing fee at this time as we elect to defer payment of the entire filing fee until receipt of a Notice to File Missing Parts.
- ☐ [] A check in the amount of \$____.00 to cover the filing is enclosed.
- ☐ [] The Commissioner is hereby authorized to charge and/or credit **Deposit Account No. 50-1017 (Billing No. 600362.0002)** as noted below. A duplicate copy of this sheet is enclosed.
- ☐ [] Any overpayments or deficiencies in the above-calculated fee.
- ☐ [] Filing fee in the amount of \$_____ as calculated above.
- ☐ [] Any additional fees required under 37 C.F.R. § 1.16 and § 1.17.
- ☐ [] In the event that a Petition for Extension of Time is required during the prosecution of this application, but not submitted, please charge any extension fee under 37 C.F.R. § 1.136(a) to our Deposit Account noted above.

CORRESPONDENCE ADDRESS

October 21, 2003
(Date)

By: Clark Jablon

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CAJ:JDS/vlb
Enclosures